



ROYAL NORWEGIAN EMBASSY

Ankara

***Supplementary Questionnaire for Schengen Visa Applications***

THE FORM IS TO BE FILLED OUT IN **ENGLISH** AND SIGNED BY THE APPLICANT

QUESTIONNAIRE D: TOURISM

**1. Information about the applicant**

|                     |  |
|---------------------|--|
| Your name, surname: |  |
| Date of birth:      |  |
| Citizenship:        |  |

**2. Occupation/Profession/Financial means**

**2.1 What is your current occupational status?**

- Employee       Unemployed       Student       Retired  
 Farmer       Housewife       Other (please specify):

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**2.2 What is your monthly income? Please specify amount in Turkish lira**

|  |  |
|--|--|
| Salary or professional income                                  |  |
| Pension  |  |
| Rental income  |  |
| Other income (support from spouse, parents, sponsor in Norway) |  |

**2.3 Do you have any property or other financial means (savings etc.)?**

- Yes       No

**If yes, please explain:**

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### **3. Family status**

#### **3.1 What is your current civil status?**

- Single                       Married                       Cohabitant  
 Divorced                       Separated                       Widow/-er  
 Other, please specify:

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#### **3.2 Who do you live with?**

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### **4. If your purpose of travel to Norway is tourism**

#### **4.1 Name of travel agency you have used to book your trip, if any:**

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#### **4.2 What places and tourist attractions do you plan to visit in Norway?**

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#### **4.3 Name of contact person in Norway, if any:**

|                   |         |
|-------------------|---------|
|                   |         |
| Telephone number: | E-mail: |

#### **4.4 Are you visiting other countries besides Norway while on this trip?**

- Yes                       No

#### **If yes, please list all countries and how many days you are staying in each country below:**

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**5. Accompanying people**

**Are you travelling with someone else?**

Yes  No

If yes, who are you travelling with?

| <b>Name, surname</b> | <b>City, Country</b> | <b>Date of birth</b> | <b>Relation</b> |
|----------------------|----------------------|----------------------|-----------------|
|                      |                      |                      |                 |
|                      |                      |                      |                 |
|                      |                      |                      |                 |
|                      |                      |                      |                 |

**6. Are you planning other visits to the Schengen-area in the near future?**

Yes  No

If yes, where are you planning to go and what is the purpose of the visit(s)?

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**7. Previous Schengen visas**

**7.1 Have you had previous visits to the Schengen-area?**

Yes  No

If yes, when and where was it, and what was the purpose of the visit?

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**7.2 Have you ever been rejected a Schengen-visa before?**

Yes  No

If yes, when, where and why?

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|      |       |   |
|------|-------|---|
| Date | Place | Signature (for minors: signature of the guardian) |
|      |       |   |